



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5417

<b>SERIAL NUMBER</b> 09/717,450	<b>FILING OR 371(c) DATE</b> 11/20/2000 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> 01997.044100.1	
<b>APPLICANTS</b> Lisa Ann Neuhold, Princeton, NJ; Loran Marie Killar, Newtown, PA;					
<b>** CONTINUING DATA *****</b> This application is a CON of 08/994,689 12/19/1997 PAT 6,613,958					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/04/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>Allowance</u> Acknowledged <u>WMM</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 45743					
<b>TITLE</b> TRANSGENIC ANIMAL MODEL FOR DEGENERATIVE DISEASES OF CARTILAGE					
<b>FILING FEE RECEIVED</b> 1306	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		